

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. <i>10-620-880</i>	FILING DATE <i>07-16-03</i>				
						CLAIMS					
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT						
	IND	DEP	IND	DEP	IND	DEP					
1							51				
2							52				
3							53				
4							54				
5							55				
6							56				
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42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	1						TOTAL IND.				
TOTAL DEP.	9	→	↓	→	↓	→	TOTAL DEP.	→	↓	→	↓
TOTAL CLAIMS	10	██████	██████	██████	██████	██████	TOTAL CLAIMS	██████	██████	██████	██████